

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>7/1/2004</u>		2 Serial/Patent # <u>10/612,485</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
<input checked="" type="checkbox"/>	Petition	<i>None</i>	<i>10/15/2003</i>	\$ 130.00	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
		7 TOTAL AMOUNT OF REFUND		\$ 130.00	
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:		
	Duplicate Payment		<div style="border: 1px solid black; display: inline-block; text-align: center;"> 9 1 3 -- 2 7 3 0 </div>		
<input checked="" type="checkbox"/>	No Fee Due (Explanation):				
<i>PTO lost the paper</i>					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Paul Shanowski</u>			TITLE: <u>Senior Attorney</u>		
SIGNATURE: <u><i>Paul Shanowski</i></u>			PHONE: <u>305-0011</u>		
OFFICE: <u><i>Office of Petitions</i></u>					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: <u><i>[Signature]</i></u>			DATE: <u>7/2/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**